Approved for use through 07/31/2006. OMB 0651-0035

10/725,792

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF

Signature Typed or Printed

Name

Date JANUARY 5, 2007

MICHAEL J. MEDLEY

forms if more than one signature is required, see below*.

Application Number

	CORRESPONDENCE ADDRESS Application	Filing Date		December 2, 2003	
		First	Named Inventor	Maresh	
	Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Art Unit		3728	
		Examiner Name		J. Johnson	
\		Atton	ney Docket Number	RPS920030236US1-LEN106220	
	Please change the Correspondence Address for the above-identified patent application to:				
	The address associated with Customer Number: 56687				
	OR				
	Firm or Individual Name				
	Address				
_	City	Sta	ate	Zip	
	Country				
	Telephone Email				
	This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use *Request for Customer Number Data Change* (PTO/SB/124).				
	I am the:				
	Applicant/Inventor				
	Assignee of record of the entire interest.				

____forms are submitted *Total of ONE This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 38 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to to take 3 minutes to complete individual gathering, preparing, and submitting the completed application from to the USPTO. There will very depending upon the individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patier and Todermack Officer, V.S. Patier A. V. 2231-3450. ON ON STEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1), Registration Number

Telephone (440) 391-5100

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or agent of record. Registration Number 20,156

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple